

#### **GEORGIA DEPARTMENT OF HUMAN RESOURCES Food Service Establishment Inspection Report**

**Establishment Name:** Waffle House #1478 Peachtree Promenade

into foods

Address: 2100 Highway 54, Suite 100 E

City: Peachtree City Time In: 11:30 am Time Out: 12:30 pm

Inspection Date: 11/19/2009 CFSM: Frederick Ragozzine (4/17/2012)

Purpose of Inspection: Routine: O Follow-Up: ● Complaint: O

Preliminary: O Other: O **Risk Type:** 1 O 2 ● 3 O Permit#: 1-4627

'Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public Health Interventions

are control measures to prevent illness or injury.

'Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects

Prior Score Grade 94 Α 8/17/09

72

**CURRENT SCORE CURRENT GRADE** 



SCORING AND GRADING: A=90-100 B=80-89 C=70-79 U<69

### FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Grade

C

Date

11/5/09

(Mark designated compliance status (IN, OUT, NA, or NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.) IN=in compliance OUT=not in compliance NO=not observed NA=not applicable COS=corrected on-site during inspection R=repeat (violation of the same code provision)=2 points per subcategory

Compliance Status										
1	IN	OUT	NA	NO	ouper vision					
	•	0			1-2. Person in charge present, demonstrates knowledge, and performs duties	0	0			
2	IN	оит	NA	NO	Employee Health, Good Hygenic Practices, Preventing Contamination by Hands-Subcategory 1					
	•	0			2-1A. Proper use of restriction & exclusion	Ó	0			
	•	0		0	2-1B. Hands clean and properly washed	0	0			
	•	0	0	0	2-1C. No bare hand contact with ready-to-eat foods or approved alternate method properly followed	0	0			
					<b>Employee Health, Good Hygenic Practices</b> -Subcategory 2	4 points				
	•	0			2-2A. Management awareness; policy present; reporting	0	0			
	•	0		0	2-2B. Proper eating, tasting, drinking, or tobacco use	0	0			
	•	0		0	2-2C. No discharge from eyes, nose, and mouth	0	0			
	•	0			2-2D. Adequate handwashing facilities supplied & accessable	0	0			
3	IN	OUT	NA	NO	Approved Source	9 po	ints			
	•	0			3-1A. Food obtained from approved source; parasite destruction	0	0			
	0	0	0	•	3-1B. Food received at proper temperature	0	0			
	•	0			3-1C. Food in good condition, safe, and unadulterated	0	0			
4	IN	OUT	NA	NO	Protection from Contamination-Subcategory 1					
	•	0	0		4-1A. Food separated and protected	0	0			
	•	0			4-1B. Proper disposition of contaminated food; returned food or unused food not re-served	0	0			
			Protection from Contamination-Subcategory 2	4 po	ints					
	•	0	0		4-2A. Food stored covered	0	0			
	•	0	0		4-2B. Food-contact surfaces: cleaned & sanitized	0	0			

Comp		liance Status						
5	IN	OUT	NA	NO	Cooking and Reheating of Potentially Hazardous Foods, Consumer Advisory-Subcategory 1	9 points		
	0	0	0	•	5-1A. Proper cooking time and temperatures	0	0	
	0	0	0	•	5-1B. Proper reheating procedures for hot holding	0	0	
					Consumer Advisory-Subcategory 2			
• 0 0		0		5-2. Consumer advisory provided for raw and undercooked foods	0	0		
6	IN	оит	NA	NO	Holding of Potentially Hazardous Foods, Date Marking Potentially Hazardous Food-Subcategory 1	9 points		
	•	0	0		6-1A. Proper cold holding temperatures	0	0	
	•	O O 6-1B. Proper hot holding temperatures		0	0			
	0	0	0	•	6-1C. Proper cooling time and temperature	0	0	
	0	0	•	0	6-1D. Time as a public health control: procedures and records	0	0	
					Date Marking-Subcategory 2			
	•	0	0	0	6-2. Proper date marking and disposition	0	0	
7	IN	OUT	NA	NO	Highly Susceptable Populations	9 points		
	0	0	•		7-1. Pasteurized foods used; profibited foods not offered	0	0	
8	IN	OUT	NA	NO	Chemicals	4 points		
	•	0	0		8-2A. Food additives: approved and properly used	0	0	
	•	0			8-2B. Toxic substances properly identified, stored, used	0	0	
9	IN	оит	NA	NO	Conformance with Approved Procedures	4 points		
	0	9-2. Compliance with variance, specialized process and HACCP plan		0	0			

## **GOOD RETAIL PRACTICES**

(Mark the numbered item OUT, if not in compliance. For items marked OUT, mark COS or R for

Co	mpl	iance Status	cos	_	
10	10 OUT Safe Food and Water, Food Identification				
	0	10A. Pasteurized eggs used where required	0	0	
	0	10B. Water and ice from approved source	0	0	
	0	10C. Variance obtained for specialized processing methods	0	0	
	0	10D. Food properly labeled; original container; required records available; shellstock tags	0	0	
11	11 OUT Food Temperature Control				
	0	$11\mbox{A}.$ Proper cooling methods used; adequate equipment for temperature control	0	0	
	0	11B. Plant food properly cooked for hot holding	0	0	
	0	11C. Approved thawing methods used	0	0	
	0	11D. Thermometers provided and accurate	0	0	
12	2 OUT Prevention of Food Contamination		3 point		
	0	12A. Contamination prevented during food preparation, storage, display	0	0	
	0	12B. Personal cleanliness	0	0	
	0	12C. Wiping cloths: properly used and stored	0	0	
	0	12D. Washing fruits and vegetables	0	0	
13	OUT	Postings and Compliance with Clean Air Act			
	0	13A. Posted: Permit/Inspection/Choking Poster/Handwashing	3 ро	0	
	0	13B. Compliance with Georgia Smoke Free Air Act	0	0	

for each item as applicable. R=Repeat (violation of the same code provision) = 1 point per								
Co	mpl	iance Status	COS	R				
14	4 OUT Proper Use of Utensils							
	O 14A. In-use utensils: Properly stored							
	O 14B. Utensils, equipment and linens: properly stored, dried, handled							
	0	O 14C. Single-use/single-service articles: properly stored, used						
	O 14D. Gloves used properly							
15	OUT	Utensils, Equipment and Vending	1 point					
	0	$15 A. \ \ Food \ \& \ nonfood\text{-}contact \ surfaces \ cleanable, properly \ designed, \ constructed, \ used$	0	0				
	0	15B. Warewashing facilities: installed, maintained, used; test strips	0	0				
	•	15C. Nonfood-contact surfaces clean.	0	0				
16	16 OUT Water, Plumbing and Waste		2 points					
	0	16A. Hot and cold water available; adequate pressure	0	0				
	0	16B. Plumbing installed; proper backflow devices	0	0				
	0	16C. Sewage and waste water properly disposed	0	0				
17	OUT	Physical Facilities	1 pc	oint				
	0	17A. Toilet facilities: properly constructed, supplied, cleaned	0	0				
	•	17B. Garbage/refuse properly disposed; facilities maintained	0	•				
	•	17C. Physical facilities installed, maintained, and clean	0	0				
	0	17D. Adequate ventilation and lighting; designated areas used	0	0				
18	OUT	T Pest and Animal Control 3						
	0	18. Insects, rodents, and animals not present	0	0				

Turne de (C'enselver)		Follow-up: Yes O No●	Follow-up	p Date:
Person in Charge (Signature):	(Print)			AM
				<b>Date:</b> 11/19/2009 11:30:00

# **Food Service Establishment Inspection Report Addendum**

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Violations cited in this report must be corrected within the time frames specified below, or as stated in the Georgia Department of Human Resources Rules and Regulations Food Service Chapter 290-5-14, Rule .10 subsection (2)(i) and (j)									
Establishr Waffle Hou	nent se #1478 Peachtree Promenade		Permit Date 1-4627 InspectionDate2						
Address 2100 Highway 54, Suite 100 E					City/State Zip C Peachtree City, GA 30269 30269				
			TEMPERATURE OBSERV	/AT	IONS				
	Item/Location	Temp	Item/Location		Temp	Item/	Location	Temp	
Sliced chee	se/ steak (walk-in cooler)	36/37	Half & half (upright cooler)		31	Grits (line)		145	
Turkey slice	es/ diced ham (WIC)	37/35	Milk (upright cooler)		34	Steak (upright o	37		
Bacon/ but	ter (WIC)	35/36	Batter (under-counter cooler)		42	42 Sausage (upright cooler)			
Milk/ choco	late milk (WIC)	36/36	Hashbrowns (prep top)		43	Raw chicken (up	oright)	36	
Shell eggs	(WIC)	37	Sliced cheese (prep top)		44	Shell eggs (uprig	ght)	44	
Steak/ appl	e pies (walk-in freezer)	11/14	Diced ham (prep top)		30	Chocolate milk (	milk (upright)		
Bacon/ bee	f patties (WIF)	12/15	Sliced tomatoes (drawer)		38	Half & half (upright)			
Chili/ gravy	(warmer)	139/140	Sliced ham (drawer)		39				
Item Number			<b>OBSERVATIONS AND COR</b>	REC	CTIVE ACTIO	NS			
S17			must be kept closed at all eaning is needed of area of						
Person in	Charge (Signature)					Dat	e		
Inspector	Inspector (Signature) Date 11/19/2009 11:30:00 AM								

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Address 2100 Highway 54, Suite 100 E	City/State Peachtree City, GA 3	<b>Zip Code</b> 30269 30269				
Item Number OBSERVATIONS AND CO	RRECTIVE ACTION	S				
Person in Charge (Signature)		Date				
Inspector (Signature)		Date 11/19/2009 11:30:00 AM				